PATENT APPLICATION FRE DETERMINATION RECORD Effective cember 8, 2004									Application or Docket Number			
		CLAIMS	AS FILED (Colur		SMALL E TYPE (Column 2)			MTY	OR		R THAN ENTITY	
U.S	S. NATIONAL	STAGE FEES					7	RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LAF	RGE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	200
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50/\$100			other situations = \$ 100 / \$ 200	1	EXAM. FEE	†	1	EXAM. FEE	DAG
SEARCH FEE			U.S. is ISA = \$50 /\$ 100 ALL other countries = \$ 200 /\$ 400		All	other situations = \$ 250 / \$ 500	1	SEARCH FEE	 	1	SEARCH FEE	LIM
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =	1	X \$ 125 =	1.	1	X \$ 250 =	TVV
TOTAL CHARGEABLE CLAIMS			10 m	inús 20 =	•		1.	X \$ 25 =	 	OR	X\$50=	
INDEPENDENT CLAIMS			minus 3 =		•		1	X \$ 100 =	 	OR		-
MUI	TIPLE DEPEN	IDENT CLAIM PR	ESENT				1	+ \$ 180 =	 	-	X \$ 200 =	
 If the difference in column 1 is less than zero, enter "0" in column 						olumn 2	J	TOTAL		OR OR	+ \$ 360 =	Den
•									<u> </u>	JOK	IOIAL	400
CLAIMS AS AMENDED - PART II (Column 1) (Cotumn 2) (Cotumn 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	" /	70	. —		X \$ 25 =		OR	X \$ 50 =	
	Independent	1 2	Minus	***	3	=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	ກ 2)	(Column 3)						
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		2	ı	X \$ 100 =		OR	x \$ 200 =	5 () 3 ()
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				LAIM			+\$180=		OR	+ \$ 360 =	
TOTAL ADDIT. FEE										OR L	TOTAL ADDIT. FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)

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